

My Name _____
Address _____
City, State, Zip _____
Phone _____
E-mail _____

I am the ☐ Petitioner
☐ Attorney for the Petitioner and my Utah Bar number is _____

In the ☐ District ☐ Justice Court of Utah

_____ Judicial District _____ County

Court Address _____

In Re Petition to Expunge the Records of

Petitioner

**Reply to Victim's Statement or
Prosecutor's Statement or AP&P
Response**

Case Number _____

Judge _____

Instructions: You may file a Reply **only** if the victim or the prosecutor has filed a statement or if Adult Probation and Parole has filed a response. If the victim or prosecutor has filed a statement or if AP&P has filed a response, this form is optional. You may file it, but you do not have to. If you file this form, you must do so within 15 days after the victim's statement or the prosecutor's statement or the AP&P response was served on you.

☐ By and through my attorney, (Attorney, check here if you are appearing for your client.)

I say as follows:

- (1) (A) Statement made by the prosecutor, victim or Adult Probation and Parole that I disagree with.

(B) I disagree because:

(2) (A) Statement made by the prosecutor, victim or Adult Probation and Parole that I disagree with.

(B) I disagree because:

I have not included any non-public information in this document.

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

Date _____ Sign here ► _____

Typed or printed name _____

Certificate of Service

I certify that I served a copy of this Reply to Victim's Statement or Prosecutor's Statement or AP&P Response on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Prosecutor)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Victim)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(AP&P)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date _____ Sign here ► _____

Typed or printed name _____